Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA FEE RATE RATE 1000 **RASIC FEE** (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = ÓR INDEPENDENT CLAIMS × 580 (37 CFR 1.16(b)) minus 3 = 0R 300 = MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) **OR** 21000 TOTAL 0R * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY HIGHEST CLAIMS PRESENT RATE ADDI-REMAINING NUMBER RATE ADDI-AMENDMENT PREVIOUSLY **EXTRA** TIONAL TIONAL **AFTER** AMENDMENT PAID FOR FEE FEE Total Minus X \$ OR Independent (37 CFR 1.16(b)) Minus X S OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT NUMBER RATE ADDI-RATE ADDI-REMAINING **EXTRA AMENDMENT** AFTER PREVIOUSLY TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus X \$ OR X \$ Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 3) (Column 1) (Column 2) CLAIMS HIGHEST PRESENT RATE ADDI-REMAINING NUMBER RATE ADDI-ENDMENT **PREVIOUSLY EXTRA** TIONAL **AFTER** TIONAL AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) OR Minus Independent (37 CFR 1.16(b)) ÓR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

ADD'L FEE

ADD'L FEE

OR

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/885,513

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2 Ominus 20=		· 0			X\$ 9=		OR	X\$18=	1
INDEPENDENT CLAIMS			3 minus 3 =		.0			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in co	olumn 2		TOTAL		OR	TOTAL	7/000
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column								SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	00	Minus	-2	OK	: /	1	X\$ 9=		ÓR	X\$18=	
	Independent	. 3	Minus	***	3			X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	علاد		OR.	+270=	
								TOTAL		OR	- TOTAL	
4	12103		Fa	(Colu	ımn 2)	(Column 3	٠,	ADDIT. FEE	17		ADDIT. FEE	THE STATE
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	Ω	Minus) 0	= /		X\$ 9=		OR	X\$18=	
	Independent	13	Minus	***	3	=/		X40= .	1	OR	V00	
L	FIRST PRESENTATION OF MULTIPLE			DEPENDENT CLAIM			J	+135=		OR	+270=	****
	1 1					•		TOTAL		OR	TOTAL	
9	120/03	(Column 1)		(Coli	ımn 2)	(Column 3	1	ADDIT. FEE			ADDIT, FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	2018	Minus	**	20	=		X\$ 9=		OR	X\$18=	in in
	Independent	33	Minus	***	3	=		X40=		OR	Yea	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		1		
•	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	TOTAL	100
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	The "Highest Nun	nber Previously Pr	aid For (Total o	r Indepen	ident) is th	a highest num	ber fo	ound in the ap	opropriate be	ox in c	COLUMNIA I.	· · · · · · · · · · · · · · · · · · ·